PTO/SB/21 (04-07)

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(to be used for all correspondence after initial		Lesie A. Micholson III							
	15	Attorney Docket Number	DEM04 P-	P-112A					
ENCLOSURES (Check all that apply)									
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatio Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s)		After Allowance Communication to TO Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):					
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remar				A-				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name Van Dyke, Gardner, Linn Signature Printed name Timothy A. Flory	& Burkhar	t, LLP							
Date May 24, 2007	Reg. No.		42540						
CERTIFICATE OF TRANSMISSION/MAILING									
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Signature May 24, 2007 Elaine L. Leva Typed or printed name

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Ryan D. Tasma et al.

Group Art Unit : 3651

Serial No. : 10/710,809

: Leslie A. Nicholson III Examiner

Filed

: August 4, 2004

For

: MOTORIZED ROLLER TRANSVERSE DRIVE

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above identified application.

The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than Small Entit		
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add Fee	
Total Claims	36	Minus	62	= 0	x \$25	\$.00	x \$50	\$.00
Independent Claims	6	Minus	7	= 0	x \$100	\$.00	x \$200	\$_	.00
First Presentation of Multiple Dependent Claims \$180					.80	\$.00	x \$360	\$.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$.00		\$.00	

- If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3
- If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Small entity status of this application has been established. 1.
- X No additional Fee is required. 2.
- A check in the amount of \$ is attached. 3.
- X Please charge any additional fees or credit overpayment to Deposit Account No. 22-0190. 4. A duplicate copy of this sheet is attached.

VAN DYKE, GARDNER, LINN & BURKHART, LLP

Date: May 24, 2007.

Timothy A. Flory, Registration No. 42 540

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